## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000066731 (9)

FARQUHAR ENTERPRISES, INC.

| Principal Place   |  | Mailing Address  |   |   |  |  |
|---|--|--|---|---|--|--|
| 8350 NW 2ND AVE.<br>A - 42  |  | 3350 NW 2ND AVE.<br>A - 42   |   |   |  |  |
| BOCA RATON FL 33431 BOCA RATON FL 3343  |  |  | 5624  |   |  |  |
|   |  |  | <ol> <li>Date Incorporated or Qualified<br/>09/20/1993</li> </ol> | 3a. Date of Last Report<br>08/12/1996   |  |  |
| 2. Principal Pi   | lace of Business 3 CWBHOUSE PR   | 2a. Mailing Address  | ibliouse d  | 4. FEI Number   | Applied For  |  |
| 21) (-21) Sulte, Apt.   |  |  | CALOUNC P   | 65-0440262  | Not Applicable   |  |
| 22  |  | Suite, Apt. #, etc.  |   | 5. Certificate of Status Desired  | \$8.75 Additional Fee Required                                   |  |
|   | MMBCH, FL.   | City & State  N. PALM B  | CH., FL.  | Election Campaign Financing     Trust Fund Contribution                                 | \$5.00 May Be Added to Fees                                      |  |
| Zip 334   | 109 PALM BCH.  | <sup>ブロ</sup> 33401  | Country<br>30 PALM B  | 8. This corporation has liability for Florida Statutes                                  | intangible tax under s. 199.032,<br>☐ Yes ☑ No                   |  |
|   | g. Name and Address of Current   | Registered Agent   |   | 10. Name and Address of New Re  | egistered Agent  |  |
| FARQUHAR, MICHAEL 81 Name   |  |  |   |   |  |  |
| 2313 CLUBHOUSE DR 82 Stree  |  |  | 82 Street   | Address (P.O. Box Number is Not Accepta   | ble)   |  |
| W PALM BCH. FL 33409  |  |  | 00  |   |  |  |
|   |  |  | 83  |   |  |  |
|   |  |  | 84 City   |   | 85 Zip Code  |  |
| 44 Diversal   | 10 the Size of Decker 007 0500   |  |   |   | FL 00 zip ooce   |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1500. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Sectio change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objection 607.0505, Florida Statutes. |  |  |   |   |  |  |
|   |  |  |   |   |  |  |
| SIGNATURE   | Skip nure typed or printed person registerep agent   | and little it and cable (NO)   | 1E: Regulered Agent signature                                     | required whoo reinctating)  | DATE   |  |
| 12.   | OFACERS AND  |  | 13.   | ADDITIONS/CHANGES TO OFFI   |  |  |
| TITLE   | Ъ  | ☐ DELETE   | 111011  | Þ   | Change Addition  |  |
| NAME  | FARQUHAR, MICHAEL  |  | 1.2 NAME  | FARQUHAR, MICHAE  | <u>-</u>   |  |
| STREET ADDRESS  | 2313 CLUBHOUSE DR  |  | 1.3 STREET ADDRESS  | 2313 Chulston SE DR   |  |  |
| CITY-ST-ZIP   | W PALM BCH. FL 33409   |  | 1.4 DITY-ST-ZIP   | 2313 CLUBHOUSE DR<br>W.PALM BCH. FL 33  | 409  |  |
| TATLE   | VP   | ☐ DELETE   | 2 1 TITLE   | VP  | Change Addition  |  |
| NAME  | FARQUHAR, LORI   |  | 22 NAME   | FARQULIAR, MICHAEL  | -  |  |
| STREET ADDRESS  | 2313 CLUBHOUSE DR.   |  | 2.3 STREET ADDRESS  | 2313 CLUBHOUSE DR.<br>W. PALM BCH. FL. 3  |  |  |
| CITY-ST-ZIP   | WEST PALM BEACH FL   | - BC: E7E  | 2. 4 City - ST - ZIP  | W. MIM BCH., FL. 3  |  |  |
| TITLE   |  | ☐ DELETE   | 3.1 TITLE   |   | Change Addition  |  |
| NAME  |  |  | 3.2 NAME  |   |  |  |
| STREET ADDRESS  |  |  | 3.3 STREET ADDRESS  |   |  |  |
| CITY-ST-ZIP   |  | DELETE   | 3.4. CITY - S1 - ZIP<br>4.1 TITLE                                 |   | Change Addition  |  |
| NAME  |  | L. Pottere   | 4.1 NIEE<br>4.2 NAME  |   | The change The Wallfold  |  |
| STREET ADDRESS  |  |  | 4. 2 NAME<br>4.3 STREET ADDRESS                                   | ·   |  |  |
| CITY-ST-ZIP   |  |  | 4.4 CITY - ST - ZIP   |   |  |  |
| TITLE   |  | DELF1E   | 5.1 TITLE   |   | Change Addition  |  |
| NAME  |  |  | 5.2 NAME  |   |  |  |
| STREET ADDRESS  |  |  | 5.3 STREET ADDRESS  |   |  |  |
| CITY-ST-ZIP   |  |  | 5.4 CHY-S1-7IP  |   |  |  |
| TITLE   |  | DELETE   | 6.1 TITLE   |   | Change Addition  |  |
| NAME  |  |  | 6.2 NAME  |   |  |  |
| STREET ADDRESS  |  |  | 6.3 STHEET ADDRESS  |   |  |  |
| CITY-ST-ZIP   |  |  | 64 City-St-ZiP  |   |  |  |
| 14 I do bereb   | y certify that the information supplied i  | vith this filing does not qual   | ify for the exemption of  | tated in Section 119.07(3)(i), Florida Statute  | s. I further certify that the                                    |  |
| Information<br>I am an of<br>appears in   | n indicated on this annual report or sur<br>ficer or director of the corporation or the<br>Block 12 or Block 13 if changed, or o | pplementat annual report is<br>e receiver in trustec empor<br>n an atlactiment with an ad- | tioe and accurate and<br>vered to execute this i<br>dress         | that my signature shall have the same legal eport as required by Chapter 607, Florida S | al effect as if made under oath; that Statutes; and that my name |  |